



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No. 040301-0577

2143 RCE
JFW

Applicant: Atsushi INOUE et al.
Title: COMMUNICATION SCHEME FOR REALIZING EFFECTIVE DATA
INPUT/SETUP IN COMPACT SIZE PORTABLE TERMINAL
DEVICE USING LOCALLY CONNECTED NEARBY COMPUTER
DEVICE
Application No.: 09/437,496
Filing Date: November 10, 1999
Examiner: Nguyen, Phuoc H.
Art Unit: 2143

REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

08/09/2004 SSITHIB1 00000077 09437496
02 FC:1251 110.00 OP

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. Submission required under 37 C.F.R. §1.114: (check items that apply)

a. Previously submitted:

- ☒ Please enter and consider the amendment/reply previously filed on May 7, 2004.
- ☐ Please consider the Affidavit(s)/Declaration(s) previously filed on ___ but not considered.
- ☐ Please consider the arguments in the Appeal Brief or Reply Brief under 37 C.F.R. § 1.116 previously filed on ___.

b. Enclosed are:

- ☒ Amendment Accompanying RCE.
- ☐ Affidavit(s)/Declaration(s).
- ☐ Information Disclosure Statement.
- ☐ Form PTO-1449 with copies of ___ listed reference(s).

Miscellaneous:

- ☐ Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ___ months.

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$770.00	= \$770.00
Total Claims:	20	- 23	= 0	x \$18.00	= \$0.00
Independents	6	- 7	= 0	x \$86.00	= \$0.00
First presentation of any Multiple Dependent Claims:			+	\$290.00	= \$0.00
				CLAIMS FEE TOTAL:	= \$770.00

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input checked="" type="checkbox"/>	Extension for response filed within the first month:	\$110.00	\$110.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$420.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$950.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,480.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$2,010.00	\$0.00
	EXTENSION FEE SUBTOTAL:		\$0.00
	EXTENSION FEE ALREADY PAID:	-	\$0.00
	EXTENSION FEE TOTAL		\$0.00
	CLAIMS AND EXTENSION FEE TOTAL:		\$880.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):		\$0.00
<input type="checkbox"/>	Suspension of action requested under 37 C.F.R. § 1.103(c)		\$0.00
	TOTAL FEE:		\$880.00

☐ Please charge Deposit Account No. 19-0741 in the amount of \$880.00. A duplicate copy of this transmittal is enclosed.

☒ A check in the amount of \$880.00 to cover the filing fee is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date August 6, 2004

Phillip J. Articola
Phillip J. Articola
Registration No. 38,819

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AMENDMENT ACCOMPANYING RCE

Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Please amend this application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this document.

Remarks/Arguments begin on page 9 of this document.